

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

Mary Bono Mack Committee

ADDRESS (number and street)  
▼

P.O. Box 3370

☐Check if different  
than previously  
reported. (ACC)

Palm Springs

CA

92263

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00332890

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

CA

45

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2007

through

03

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Meredith Kelley

Signature of Treasurer

Electronically Filed by Meredith Kelley

Date

01

31

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Mary Bono Mack Committee

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	193212.20	198922.20
(b) Total Contribution Refunds (from Line 20(d)).....	2000.00	7145.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	191212.20	191777.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	103876.39	219998.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	7062.49	7062.49
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	96813.90	212936.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	229594.67	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name  
Mary Bono Mack Committee

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 7

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

136468.00

138268.00

(ii) Unitemized.....

18994.20

22704.20

(iii) TOTAL of contributions

from individuals..... ▶

155462.20

160972.20

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

37750.00

37950.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS  
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

193212.20

198922.20

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

7062.49

7062.49

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

200274.69

205984.69

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	103876.39	219998.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2000.00	7145.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	7145.00
21. OTHER DISBURSEMENTS.....	21200.00	23200.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	127076.39	250343.72

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	156396.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	200274.69
25. SUBTOTAL (add Line 23 and Line 24).....	356671.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	127076.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	229594.67

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Katherine Herbert Alden

Mailing Address 2995 Woodside Road  
Suite 400

City State Zip Code  
Woodside CA 94062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Woodside Hotels and Resor-  
ts

Occupation  
Proprietor

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2007

Transaction ID: 1175023632739

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Corky Anderson

Mailing Address 3740 W Caldwell Ave

City State Zip Code  
Visalia CA 93277

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pioneer Nursery

Occupation  
Farmer

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 05 / 2007

Transaction ID: 1173801344603

Amount of Each Receipt this Period

400.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Marion V. Ashley

Mailing Address 1335 Rimrock Drive

City State Zip Code  
Perris CA 92570

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Real Estate

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 08 / 2007

Transaction ID: 1172675552818

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Jackie Autry

Mailing Address 328 W. Mountain view Place

City State Zip Code  
Palm Springs CA 92262

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Homemaker

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175025205638

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Michael Barrett

Mailing Address 15000 Surveyor Blvd  
Suite100

City State Zip Code  
Addison TX 75001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Barrett Burke Wilson Cast-  
le Daffin & F

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172671713404

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Bell

Mailing Address 8341 W Sunset Blvd  
Unit 6

City State Zip Code  
Los Angeles CA 90069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Info requested

Occupation  
Info requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Transaction ID: 1173965065364

Amount of Each Receipt this Period

1250.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**4550.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)

Mr Morris R Beschloss

Mailing Address 71000 Tamarisk Lane

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172679016632

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Edra Blixseth

Mailing Address 42-765 Dunes View RD

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Self

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173791640966

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mrs Emily Borba

Mailing Address 76-462 Via Chianti

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CBB

Occupation

Director

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801448035

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Emily Bourne

Mailing Address 8 Wildhorse Ln

City

Rolling Hills

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172686008498

Amount of Each Receipt this Period

113.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Lori Bowers

Mailing Address 79-245 Mandarin

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential

Occupation  
Realtor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801203048

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mark A. Bragg

Mailing Address 64515 Via fermato

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Developer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173792892281

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2063.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark A. Bragg

Mailing Address 64515 Via fermato

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Developer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801297746

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

TERRANCE COSGROVE

Mailing Address 620 6TH ST SOUTH

City

Kirkland

State

WA

Zip Code

98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FMS, Inc

Occupation  
Self

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175024778954

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

THERESA COSGROVE

Mailing Address 620 6TH ST SOUTH

City

Kirkland

State

WA

Zip Code

98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
FMS

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175024818467

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Martin Cancienne

Mailing Address 7075 Hwy 1 S  
PO Box 36

City State Zip Code  
Belle Rose LA 70341

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Public relations

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175628427295

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Shirley Chuchian

Mailing Address 45-473 Camino del Ray

City State Zip Code  
Indian Wells CA 92210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
housewife

Occupation  
housewife

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175626376041

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter B. Clark

Mailing Address 7675 La Jolla Blvd.  
Unit 203

City State Zip Code  
La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 08 / 2007

Transaction ID: 1172588546767

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mary Cline

Mailing Address 1085 Deepwell RD

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173729526485

Amount of Each Receipt this Period

300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard Daniels

Mailing Address 55-150 Shoal Creek

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mine Reclamation

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010055127

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Rhett Day

Mailing Address PO Box 10330

City

Palm Desert

State

CA

Zip Code

92255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Electric wholesaler

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 7

Transaction ID: 1173728090683

Amount of Each Receipt this Period

250.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Herbert Lee Dixon

Mailing Address 2542 Vale Ct.

City

Davidsonville

State

MD

Zip Code

21035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robison International

Occupation  
Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801029791

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Frank Donia

Mailing Address 79422 Montego Bay Drive

City

Bermuda Dunes

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Transaction ID: 1172755129373

Amount of Each Receipt this Period

500.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ray D Edwards

Mailing Address 110 La Cerra Drive

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172687171602

Amount of Each Receipt this Period

225.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Eichenberg

Mailing Address 1 Collins Is

City

Newport Beach

State

CA

Zip Code

92662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ellison Ed. Eq. Incorporated

Occupation

Co-own small business

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172673195759

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Morton Farina

Mailing Address 8 Scarborough Way

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Real Estate Broker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173792125077

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ms. Sara J. Finley

Mailing Address 909 Close LN

City

Nashville

State

TN

Zip Code

37205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caremark RX, Inc.

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172590347250

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jerry Foster

Mailing Address 1565 Deer Crossing Dr

City

Diamond Bar

State

CA

Zip Code

91765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173799316125

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Gregory Frazier

Mailing Address 1019 Constitution Ave, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation  
Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175629356468

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Helene V. Galen

Mailing Address 37791 Halper Lake Drive

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801382741

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Ms. Tina Garcia

Mailing Address 10541 N Broadway

City

Blythe

State

CA

Zip Code

92225-1266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Transaction ID: 1175025289337

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Irvin Gettleman

Mailing Address 692 Mission Creek Drive

City

Palm Desert

State

CA

Zip Code

92211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Orthopedic Surgeon

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	0	7

Transaction ID: 1175701753452

Amount of Each Receipt this Period

250.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Daniel R. Glickman

Mailing Address 4442 Hawthorne St., NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Motion Picture Assoc. of  
America

Occupation

President

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	7

Transaction ID: 1175627177990

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Susan A. Goldware

Mailing Address 2445 Rolling Ridge Road

City

Riverside

State

CA

Zip Code

92506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172675464103

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James R. Greenbaum

Mailing Address One Hawkeye Park  
69-844 Highway 111, Suite H

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Transaction ID: 1172755805639

Amount of Each Receipt this Period

500.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mary Heckmann

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023756484

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Carolyn Heidenreich

Mailing Address 50-030 Monteloma CT

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009158402

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Carolyn Heidenreich

Mailing Address 50-030 Monteloma CT

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175024867246

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ralph Hemingway

Mailing Address 1131 SW Klickitat Way

City

Seattle

State

WA

Zip Code

98134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175025101955

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Ralph Hemingway

Mailing Address 1131 SW Klickitat Way

City

Seattle

State

WA

Zip Code

98134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175025117970

Amount of Each Receipt this Period

700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ms John Higgins

Mailing Address 11021 Oro Vista Avenue

City

Sunland

State

CA

Zip Code

91040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Telecom Inc.

Occupation

Telecom Technician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023720767

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. James Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173812661403

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173812692464

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jacqueline L. Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1176233259527

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. James Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1176233304135

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1176233346290

Amount of Each Receipt this Period

1050.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jacqueline L. Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1176233392086

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jacqueline L. Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1176233427569

Amount of Each Receipt this Period

1050.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Jacqueline L. Houston

Mailing Address 345 N. Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1176233541785

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

JENNIFER IMBRIANI

Mailing Address 33 Churchill Lane

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jenco Productions

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023113638

Amount of Each Receipt this Period

2100.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mrs Dinesh Imbriani

Mailing Address 740 Creekside DR

City

Redlands

State

CA

Zip Code

92373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023038266

Amount of Each Receipt this Period

2100.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. William M. Jeffrey

Mailing Address PO Box 253

City

Thermal

State

CA

Zip Code

92274

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: 1173727632879

Amount of Each Receipt this Period

300.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Russell Johnson

Mailing Address 2630 Huntington Drive

City

Aptos

State

CA

Zip Code

95003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172690655752

Amount of Each Receipt this Period

290.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Carl J. Johnson

Mailing Address 1211 Minnesota Avenue

City

Natrona Heights

State

PA

Zip Code

15065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
II-VI Inc.

Occupation

Chairman and CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175022823057

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2090.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mark Kessler

Mailing Address 14 Calle La Reina

City

Rancho Mirage

State

CA

Zip Code

92270-4099

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Sales

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010243541

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Maureen Kessler

Mailing Address 17632 Sunburst St

City

Northridge

State

CA

Zip Code

91325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010287226

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Knowlton

Mailing Address 47705 Vintage Club Dr East

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172588371126

Amount of Each Receipt this Period

300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Paul Kouri

Mailing Address One Regency Drive

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Physician

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	7

Transaction ID: 1173792063016

Amount of Each Receipt this Period

100.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Paul Kouri

Mailing Address One Regency Drive

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Physician

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	7

Transaction ID: 1173792832550

Amount of Each Receipt this Period

150.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Francis J. Kramer

Mailing Address 10491 Allante Ct.

City

Gibsonia

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
info requested

Occupation

info requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Transaction ID: 1175022624191

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Joseph Kuzmanic

Mailing Address 17 PRINCETON DR

City

RANCHO MIRAGE

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172688198321

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Torsten Leines

Mailing Address 43568 Bordeaux DR

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009739735

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

W. Howard Lester

Mailing Address 3250 Van Ness Avenue

City

San Francisco

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Williams-Sonoma, Inc.

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023406640

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

R. Kirk Lester

Mailing Address 72390 Morningstar Road

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
info requested

Occupation

info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023512745

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Rich Lipeles

Mailing Address PO Box 286

City

Sunset Beach

State

CA

Zip Code

90742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009585258

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

PAMELA MCGUIRE

Mailing Address 45655 APACHE RD

City

INDIAN WELLS

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
homemaker

Occupation

homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009022502

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

PAMELA MCGUIRE

Mailing Address 45655 APACHE RD

City

INDIAN WELLS

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
homemaker

Occupation  
homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009049391

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Donna MacMillan

Mailing Address 74695 Wren DR

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Housewife

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Transaction ID: 1172755697628

Amount of Each Receipt this Period

1000.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mallard Financial Group, LLC

Mailing Address 72-960 Fred Waring Drive Ste. 7

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1176216826389

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Benjamin Daniels

Mailing Address 45421 Banff Springs Street

City

Indio

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mallard Financial Group

Occupation

Financial adviser

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1176216863732

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Mr James Martinelli

Mailing Address 1832 Liberty Way

City

Valencia

State

PA

Zip Code

16059-3912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
II-VI Inc.

Occupation

V.P. Gov't and Military Business

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008573178

Amount of Each Receipt this Period

1600.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mashantucket Pequot Tribal Nation

Mailing Address P.O. Box 3008

City

Mashantucket

State

CT

Zip Code

06339-3008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175023221945

Amount of Each Receipt this Period

2000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Charles McCarthy

Mailing Address 73135 Amber ST

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 0 7

Transaction ID: 1172692269208

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin B. McGuire

Mailing Address 45655 Apache Road

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Palm Desert National Bank

Occupation

Chairman & CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008951364

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin B. McGuire

Mailing Address 45655 Apache Road

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Palm Desert National Bank

Occupation

Chairman & CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008978972

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert M. Meissner

Mailing Address 3420 Lakeside View Drive

City

Falls Church

State

VA

Zip Code

22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SISCORP

Occupation  
Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175629234286

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard N. Merkin

Mailing Address 3115 Ocean Front Walk  
Ste 1

City

Marina Del Rey

State

CA

Zip Code

90292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009326879

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard N. Merkin

Mailing Address 3115 Ocean Front Walk  
Ste 1

City

Marina Del Rey

State

CA

Zip Code

90292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009349206

Amount of Each Receipt this Period

1950.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert H. Michel

Mailing Address 322 8th St SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hogan & Hartson

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173792360665

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kenneth P. Miles

Mailing Address 8 Avenida Andra

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: 1174923625416

Amount of Each Receipt this Period

1000.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John W. Mitchell

Mailing Address 1224 Mary Fleming Circle

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: 1173728040077

Amount of Each Receipt this Period

1000.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Morongo Band of Mission Indians Native American Rights Fund-B

Mailing Address PO Box 366

City

Cabazon

State

CA

Zip Code

92230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009933554

Amount of Each Receipt this Period

2100.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Morongo Band of Mission Indians Native American Rights Fund-B

Mailing Address PO Box 366

City

Cabazon

State

CA

Zip Code

92230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009972678

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Morongo Band of Mission Indians Native American Rights Fund-B

Mailing Address PO Box 366

City

Cabazon

State

CA

Zip Code

92230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009995895

Amount of Each Receipt this Period

700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

David R. Morrow

Mailing Address 3930 Bob Hope Drive

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Morrow Institute

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172670849193

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Angelo Mozilo

Mailing Address 2816 Ladsbrook Way

City

Westlake Village

State

CA

Zip Code

91361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Countrywide

Occupation  
Banker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172671329624

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter C. Murphy, Jr.

Mailing Address 78154 San Timoteo

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173792940935

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

THOMAS NOYA

Mailing Address 14 CAPE DANBURY

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community Home Loans, LLC

Occupation  
Real Estate

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173800987527

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ms. Frances B. Nelson

Mailing Address 60 31st Ave.

City

San Mateo

State

CA

Zip Code

94403-3497

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bohannon Development Co.

Occupation  
Executive

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 3 / 2 0 0 7

Transaction ID: 1175702010761

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Nestande & Associates

Mailing Address 43-645 Monterey  
Suite B

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partnership

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173810076629

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Brian Nestande

Mailing Address 43-645 Monterey  
Suite B

City State Zip Code  
Palm Desert CA 92260

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nestande & Associates

Occupation  
Partner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173810158656

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Sole proprietorship attri-  
bution

**B.**

Full Name (Last, First, Middle Initial)

Bobbe Nuckels

Mailing Address 840 Chil Tern Road

City State Zip Code  
Hillsborough CA 94010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173799431306

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard J. O'Linn

Mailing Address 1025 S Palm Canyon Dr

City State Zip Code  
Palm Springs CA 92264

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Security & Alarm Systems  
Co.

Occupation  
Owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173795726840

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr Mani Ott

Mailing Address 78680 Calle Tampico

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Coast Turf

Occupation

Pilot

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173793359242

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

CHESTER JOHN PIPKIN

Mailing Address 501 W WALNUT ST

City

COMPTON

State

CA

Zip Code

90220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Belkin Corp

Occupation

President & CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 0 7

Transaction ID: 1172692718969

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. William H. Phillips

Mailing Address PO Box 419

City

La Quinta

State

CA

Zip Code

92253-0419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William H. Phillips Co.

Occupation

Produce Broker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: 1172679275574

Amount of Each Receipt this Period

500.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. William H. Phillips

Mailing Address PO Box 419

City

La Quinta

State

CA

Zip Code

92253-0419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William H. Phillips Co.

Occupation

Produce Broker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173791905014

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary M. Plummer

Mailing Address PO Box 1843

City

Monterey

State

CA

Zip Code

93942

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peninsula Moving and Stor-  
age Co

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173800777053

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Octavian Popaluca

Mailing Address 21 Toscana Way W

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175626817334

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

William T. Powers

Mailing Address 77340 Black Mountain Trail

City

Indian Wells

State

CA

Zip Code

92210-9185

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pacific Western Bank

Occupation  
Banker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173800949389

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert N Pyle

Mailing Address 50225 Via Simpatico

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172670634062

Amount of Each Receipt this Period

180.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Patricia Pyle

Mailing Address 50255 Via Simpatico

City

La Quinta

State

CA

Zip Code

92253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173792746382

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Krishnama Raju

Mailing Address 6906 Royal Hunt Ridge DR

City

Riverside

State

CA

Zip Code

92506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172605080827

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Heather S. Raumin

Mailing Address 48-440 Prairie Drive

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010824921

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Madeline M. Redstone

Mailing Address 71071 La Paz Road

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Philanthropist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175025245167

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Allan Reichle

Mailing Address 2961 Calle Loreto

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	7

Transaction ID: 1175617698060

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Marion Rogers Riley

Mailing Address 1130 Shanandoah Rd.

City

San Marino

State

CA

Zip Code

91108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	7

Transaction ID: 1173801601746

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Barbara Rottschaefer

Mailing Address 73311 Ironwood ST

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Doctor

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	3	/	2	0	0	7

Transaction ID: 1175702598472

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1450.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Carl E. Rowe

Mailing Address 11751 Davis St.

City

Moreno Valley

State

CA

Zip Code

92557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Integrated Communities

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Transaction ID: 1172755763329

Amount of Each Receipt this Period

1000.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Margit F. Rusche

Mailing Address 62450 Chiriaco RD

City

Chiriaco Summit

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Travel Center/Chiriaco Su-  
mmit

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Transaction ID: 1173706209621

Amount of Each Receipt this Period

300.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

ALFREDO SANDOVAL

Mailing Address 45510 OSAGE CT

City

INDIAN WELLS

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Creosote Partners

Occupation

Investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008866212

Amount of Each Receipt this Period

400.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Peter M. Scheer

Mailing Address PO Box 6000

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Surgeon

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010146951

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Peter M. Scheer

Mailing Address PO Box 6000

City

Rancho Mirage

State

CA

Zip Code

92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Surgeon

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175010171591

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. James M. Schlecht

Mailing Address 1500 Murray Canyon

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schlecht, Shevin & Shoenb-  
erger

Occupation  
Partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172688122700

Amount of Each Receipt this Period

300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Ken M Scott

Mailing Address 27 Diamond E Drive

City

Palm Desert

State

CA

Zip Code

92260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sunrise C.C.

Occupation

Prof golfer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: 1173727981642

Amount of Each Receipt this Period

500.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Edwin A. Seipp, Jr.

Mailing Address 49 Tuscaloosa Avenue

City

Atherton

State

CA

Zip Code

94027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172686455040

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

E. Del Smith

Mailing Address 4712 N 32nd Street

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
E. Del Smith & Co.

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: 1172671583457

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Earl Smith

Mailing Address 2700 Jacaranda Rd

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: 1173727735280

Amount of Each Receipt this Period

250.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Alicia W. Smith

Mailing Address 1401 K Street NW  
Suite 1200

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Smith-Free Group

Occupation

Sr. Vice President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175690552608

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Soboba Band of Luiseno Indians

Mailing Address PO Box 487

City

San Jacinto

State

CA

Zip Code

92581

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801109599

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3050.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Soboba Band of Luiseno Indians

Mailing Address PO Box 487

City

San Jacinto

State

CA

Zip Code

92581

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	7

Transaction ID: 1173801130629

Amount of Each Receipt this Period

200.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Sam Paul Spinello

Mailing Address 75600 Mary Lane

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Real Estate Broker

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	7

Transaction ID: 1175008001248

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Sam Paul Spinello

Mailing Address 75600 Mary Lane

City

Indian Wells

State

CA

Zip Code

92210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Real Estate Broker

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	7

Transaction ID: 1175008038450

Amount of Each Receipt this Period

700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3200.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Amber Spinello

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Spinello, Inc

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008239036

Amount of Each Receipt this Period

2300.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Amber Spinello

Mailing Address 75600 Mary LN

City

State

Zip Code

Indian Wells

CA

92210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Spinello, Inc

Occupation

Info requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008258895

Amount of Each Receipt this Period

700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr Richard G. St. Marie

Mailing Address 25190 - 389th Avenue  
PO Box 98

City

State

Zip Code

Plankinton

SD

57368

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gopher News Co.

Occupation

Sales

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175009651098

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Vanstan Stevenson

Mailing Address 5704 Bradley Blvd

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vans Stevenson

Occupation  
Senior VP

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175690437641

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Thelma Stewart

Mailing Address 1067 Bristol

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: 1172688701486

Amount of Each Receipt this Period

400.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ms. Gloria Stroschein

Mailing Address P.O. Box 1030

City

Blythe

State

CA

Zip Code

92226-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Farmer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173793033884

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Frederic E. Supple, Jr.

Mailing Address 2100 E Tahquitz Canyon Way

City State Zip Code  
Palm Springs CA 92262

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KPSL/KDES Radio Corp.

Occupation  
Investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175617750761

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Pam Sweat

Mailing Address 72-659 Pitahaya Street

City State Zip Code  
Palm Desert CA 92260

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Scheer Kreizenbeck Sam Pr-  
of Partnershi

Occupation  
Medical Administrator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2007

Transaction ID: 1175010103250

Amount of Each Receipt this Period

1900.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

The Thompson Company

Mailing Address 7161 Indiana Ave  
Suite A

City State Zip Code  
Riverside CA 92504-4555

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2007

Transaction ID: 1175712515536

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Jerome Thompson

Mailing Address 7161 Indiana Ave  
Suite ACity State Zip Code  
Riverside CA 92504FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Real EstateReceipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 7

Transaction ID: 1175712575222

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**[MEMO ITEM]**

Sole Proprietorship

**B.**

Full Name (Last, First, Middle Initial)

Twenty-Nine Palms Band of Mission Indians

Mailing Address 46-200 Harrison Place

City State Zip Code  
Coachella CA 92236FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801476659

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Mrs Bobbie Wade

Mailing Address 9821 Katy FRWY  
Ste 1050City State Zip Code  
Houston TX 77024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requestedOccupation  
Info requestedReceipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175024975554

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert B Wagner

Mailing Address PO Box 970

City

Thousand Palms

State

CA

Zip Code

92276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Executive

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	7

Transaction ID: 1173801261810

Amount of Each Receipt this Period

1700.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Jeff E. Walker

Mailing Address PO Box 4603

City

Palm Springs

State

CA

Zip Code

92263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Victory Christian Center

Occupation

Minister

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	7

Transaction ID: 1172755632694

Amount of Each Receipt this Period

250.00

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Douglas Walters

Mailing Address 1636 W Olive

City

Redlands

State

CA

Zip Code

92373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Transaction ID: 1175023184478

Amount of Each Receipt this Period

1800.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3750.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Eddie Wang

Mailing Address 1822 Spruce St.

City

S Pasadena

State

CA

Zip Code

91030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
6LC Enterprises

Occupation

Architect

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	7

Transaction ID: 1172675279906

Amount of Each Receipt this Period

210.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Mr. James A. Willingham

Mailing Address 615 Edith Way

City

Long Beach

State

CA

Zip Code

90806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	7

Transaction ID: 1172672984050

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Michael W Woods

Mailing Address 38384 Via Roberta

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	7

Transaction ID: 1173792212403

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

710.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Paulette Young

Mailing Address 41-480 Yucca Lane

City

Bermuda Dunes

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	7

Transaction ID: 1173792436692

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Patricia L. Young

Mailing Address 81880 Arus Avenue

City

Indio

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Transaction ID: 1175010208386

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Mr Greg D. Young

Mailing Address 38305 N. Jefferson St.

City

Indio

State

CA

Zip Code

92203-9427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cocoph Nurseries

Occupation

Partner

Receipt For: 2008

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Transaction ID: 1175010739815

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Paulette Young

Mailing Address 41-480 Yucca Lane

City

Bermuda Dunes

State

CA

Zip Code

92201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	7

Transaction ID: 1175010773907

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

136468.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

American Cable Assoc. PAC

Mailing Address One Parkway Center  
Suite 212

City State Zip Code  
Pittsburgh PA 15220

FEC ID number of contributing  
federal political committee.

**C** C00364109

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173791454439

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

American Dental PAC

Mailing Address 1111 14th St., NW  
Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00000729

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175628980358

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

American Dietetic Assoc. (ADA) PAC

Mailing Address 1120 Connecticut Avenue NW  
Suite 480

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175628024289

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

American Hotel & Lodging Assoc. PAC

Mailing Address 1201 New York Ave NW  
Suite 600

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00001198

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2007

Transaction ID: 1175024062845

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Arent Fox PLLC PAC

Mailing Address 1050 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00241380

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175627224019

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

California Dairies Federal PAC

Mailing Address P.O. Box 2198

City State Zip Code  
Los Banos CA 93635

FEC ID number of contributing  
federal political committee.

**C** C00349746

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175627274626

Amount of Each Receipt this Period

5000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Echostar Communications Corp. PAC

Mailing Address 5701 S. Santa Fe Drive

City

Littleton

State

CO

Zip Code

80120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175628904846

Amount of Each Receipt this Period

1500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Friends of Ray LaHood

Mailing Address 4238 N. Knoxville Avenue

City

Peoria

State

IL

Zip Code

61614

FEC ID number of contributing  
federal political committee.

C

C00284901

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173791944171

Amount of Each Receipt this Period

2000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Help America's Leaders Political Action Committee (HALPAC)

Mailing Address 1155 21st Street, NW  
Suite 300

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

C00376038

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 0 7

Transaction ID: 1172692562695

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Herbalife International PAC

Mailing Address 1800 Century Parkway East

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing  
federal political committee.

**C** C00393298

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: 1173791687394

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

II-VI Incorporated PAC

Mailing Address 3420 Lakeside View Drive

City

Falls Church

State

VA

Zip Code

22041

FEC ID number of contributing  
federal political committee.

**C** C00377960

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008686657

Amount of Each Receipt this Period

2000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

INTL Academy of Compounding Pharmacists

Mailing Address PO Box

City

Sugarland

State

TX

Zip Code

77487

FEC ID number of contributing  
federal political committee.

**C** C00424143

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175627946915

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Koch Industries Inc. PAC

Mailing Address 655 15th St., NW  
Suite 445

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175629391764

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175629442011

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

New York Mercantile Exchange PAC

Mailing Address 1 North End Avenue  
World Financial Center

City State Zip Code  
New York NY 10282

FEC ID number of contributing  
federal political committee.

**C** C00230185

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175629187663

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Paul, Hastings, Janofsky, & Walker PAC

Mailing Address 515 South Flower Street  
25th Floor

City State Zip Code  
Los Angeles CA 90071

FEC ID number of contributing  
federal political committee. **C** C00144584

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175629119540

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Surewest Communications PAC

Mailing Address 455 Capitol Mall  
Suite 801

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee. **C**

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175025160733

Amount of Each Receipt this Period

2500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Union Pacific Corp. Fund for Effective Govt

Mailing Address 600 Thirteenth Street NW  
Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00010470

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175628323887

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

United Parcel Service Inc. PAC

Mailing Address 55 Glenlake Parkway, NE

City

Atlanta

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

Transaction ID: 1175008346641

Amount of Each Receipt this Period

500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

United Parcel Service Inc. PAC

Mailing Address 55 Glenlake Parkway, NE

City

Atlanta

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: 1175628373186

Amount of Each Receipt this Period

2500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Universal Music Group PAC

Mailing Address P.O. Box 31756

City

Charlotte

State

NC

Zip Code

28234

FEC ID number of contributing  
federal political committee.

**C** C00392464

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: 1173801891590

Amount of Each Receipt this Period

1000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 107

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Verizon Communications Inc. Good Gov't Club

Mailing Address 1717 Arch Street  
47th Floor South

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2007

Transaction ID: 1175629028091

Amount of Each Receipt this Period

4000.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Viacom Int'l, Inc. PAC

Mailing Address 1501 M Street, NW  
Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00167759

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2007

Transaction ID: 1175023549649

Amount of Each Receipt this Period

2500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Viacom Int'l, Inc. PAC

Mailing Address 1501 M Street, NW  
Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00167759

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2007

Transaction ID: 1175023576273

Amount of Each Receipt this Period

2500.00

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

37750.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 107

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 360001

City

Ft. Lauderdale

State

FL

Zip Code

33336

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	7

Transaction ID: 1176687638007

Amount of Each Receipt this Period

8.25

Credit Card

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address PO Box 1140

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1376.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	7

Transaction ID: 1173729032401

Amount of Each Receipt this Period

1376.09

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Duplicate payment

**C.**

Full Name (Last, First, Middle Initial)

Mary's Political Action Committee

Mailing Address 1155 21st Street, NW  
Suite 300

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

C00365338

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5678.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	7

Transaction ID: 1177443630495

Amount of Each Receipt this Period

5678.15

Check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
see check to Bank of Amer-  
ica on 1/11/07 for \$9,627-  
.05

SUBTOTAL of Receipts This Page (optional) .....

7062.49

TOTAL This Period (last page this line number only) .....

7062.49

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.** Full Name (Last, First, Middle Initial)  
Arthur J. Finkelstein & Associates

Mailing Address 16 North Astor

City Irvington State NY Zip Code 10533

Purpose of Disbursement  
Political consulting fees

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1171982774053

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

525.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Arthur J. Finkelstein & Associates

Mailing Address 16 North Astor

City Irvington State NY Zip Code 10533

Purpose of Disbursement  
Political consulting fees

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1172604084291

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

18449.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement  
Merchant fees

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173708434774

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

26.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

19001.16

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 3530

City  
Rancho CordovaState  
CAZip Code  
95741-3530Purpose of Disbursement  
Credit card charges see below

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173714087169

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

1942.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

AOL On-Line Service

Mailing Address 4892 First Coast Tech Parkway

City  
JacksonvilleState  
FLZip Code  
32224Purpose of Disbursement  
Internet service charges

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176733463929

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

57.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
WilmingtonState  
DEZip Code  
19801Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176734204432

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

203.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

1942.33

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Roy's Restaurant

Mailing Address 340 East 2nd Street

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Food and beverage expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176735752060

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

445.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 350 S. Palm Canyon Drive

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176734150246

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

39.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

U.S. House of Representatives

Mailing Address Capitol Hill

City Washington State DC Zip Code 20500

Purpose of Disbursement  
Food expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176733604298

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

95.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

United Airlines Air Travel Plan

Mailing Address PO Box 2013

City  
ChicagoState  
ILZip Code  
60673Purpose of Disbursement  
Traveling expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176733765777

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 2167

City  
FolsomState  
CAZip Code  
95763Purpose of Disbursement  
Telephone charges

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176734369066

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

123.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 3530

City  
Rancho CordovaState  
CAZip Code  
95741-3530Purpose of Disbursement  
Credit card charges see below

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1174918997161

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Amount of Each Disbursement this Period

6064.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

6064.75

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address PO Box 619616

City  
DallasState  
TXZip Code  
75261Purpose of Disbursement  
Traveling expense

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176736123077

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	7	

Amount of Each Disbursement this Period

631.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

AOL On-Line Service

Mailing Address 4892 First Coast Tech Parkway

City  
JacksonvilleState  
FLZip Code  
32224Purpose of Disbursement  
Internet service expense

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176736057595

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	7	

Amount of Each Disbursement this Period

22.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Best Buy

Mailing Address 44-449 Town Center Way

City  
Palm DesertState  
CAZip Code  
92260Purpose of Disbursement  
Supplies expense

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176736626870

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	7	

Amount of Each Disbursement this Period

800.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Best Buy	<b>Transaction ID:</b> 1176736298273 <b>Date of Disbursement</b>
Mailing Address 44-449 Town Center Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Palm Desert CA 92260 Purpose of Disbursement Supplies for event expense Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>410.61</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>001</div> Category/ Type <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) JetBlue Airways	<b>Transaction ID:</b> 1176736579840 <b>Date of Disbursement</b>
Mailing Address PO Box 17435	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Salt Lake City UT 84117 Purpose of Disbursement Traveling expense Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>552.30</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>001</div> Category/ Type <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Margarita's Restaurant	<b>Transaction ID:</b> 1176736678899 <b>Date of Disbursement</b>
Mailing Address 23320 Valencia Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Valencia CA 91355 Purpose of Disbursement Food and beverage expense Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>43.67</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>001</div> Category/ Type <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee**A.**Full Name (Last, First, Middle Initial)  
Mollers Garden Center

Mailing Address 72235 Painters Path

City State Zip Code  
Palm Desert CA 92210Purpose of Disbursement  
Supplies for event expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176737669814  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Amount of Each Disbursement this Period

228.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
Office Max

Mailing Address 73411 Highway 111

City State Zip Code  
Palm Desert CA 92260Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176736354271  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Amount of Each Disbursement this Period

144.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**Full Name (Last, First, Middle Initial)  
Office Max

Mailing Address 73411 Highway 111

City State Zip Code  
Palm Desert CA 92260Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176736486703  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Amount of Each Disbursement this Period

120.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sony

Mailing Address Westfield Garden State Plaza  
One Garden State Plaza

City Paramus State NJ Zip Code 07652

Purpose of Disbursement  
Supplies for event

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176735965380  
Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

2876.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement  
Bank fees

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175089403402  
Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

342.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement  
Credit card charges see below

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175702734111  
Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

9627.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

9969.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Alamo Rent-a-Car Mailing Address 5164 Rent-A-Car	<b>Transaction ID:</b> 1176754372344 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div>
City Las Vegas State NV Zip Code 89123 Purpose of Disbursement Rental car expense Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1307.91</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) American Airlines Mailing Address PO Box 619616 City Dallas State TX Zip Code 75261 Purpose of Disbursement Traveling expense Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1176738641043 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>229.20</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) AOL On-Line Service Mailing Address 4892 First Coast Tech Parkway City Jacksonville State FL Zip Code 32224 Purpose of Disbursement Internet service expense Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1176753990077 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>122.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div> <div></div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div></div>

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) AOL On-Line Service	<b>Transaction ID:</b> 1176738128843 <b>Date of Disbursement</b>
Mailing Address 4892 First Coast Tech Parkway	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div>
City Jacksonville State FL Zip Code 32224	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet service expense	<div> <div>41.80</div> </div>
Candidate Name	<div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53         </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>001</div> <div>Category/Type</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Aspen Skiing Company	<b>Transaction ID:</b> 1176754455028 <b>Date of Disbursement</b>
Mailing Address PO Box 1248	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div>
City Aspen State CO Zip Code 81612	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lift tickets for fundraising event	<div> <div>569.00</div> </div>
Candidate Name	<div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53         </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>001</div> <div>Category/Type</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Best Buy	<b>Transaction ID:</b> 1176739838247 <b>Date of Disbursement</b>
Mailing Address 44-449 Town Center Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div>
City Palm Desert State CA Zip Code 92260	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Supplies expense	<div> <div>21.53</div> </div>
Candidate Name	<div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53         </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>001</div> <div>Category/Type</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div> <div>0.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	



PAGE 73 / 107

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> <b>Full Name (Last, First, Middle Initial)</b> <b>Delta Airlines</b>	<b>Transaction ID:</b> 1176738602669 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>01 / 11 / 2007</div> </div>				
<b>Mailing Address</b> 1629 K St., NW Suite 501	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">277.71</div>				
<table style="width: 100%;"> <tr> <td style="width: 35%;"><b>City</b> Washington</td> <td style="width: 15%;"><b>State</b> DC</td> <td style="width: 50%;"><b>Zip Code</b> 20006</td> </tr> </table>	<b>City</b> Washington	<b>State</b> DC	<b>Zip Code</b> 20006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code</b> 20006			
<table style="width: 100%;"> <tr> <td style="width: 55%;"> <b>Purpose of Disbursement</b>  Traveling expense </td> <td style="width: 45%; text-align: center;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>  Category/ Type </td> </tr> <tr> <td colspan="2"><b>Candidate Name</b></td> </tr> </table>	<b>Purpose of Disbursement</b> Traveling expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type	<b>Candidate Name</b>		
<b>Purpose of Disbursement</b> Traveling expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type				
<b>Candidate Name</b>					
<table style="width: 100%;"> <tr> <td style="width: 30%;"> <b>Office Sought:</b>    <input checked="" type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President </td> <td style="width: 70%;"> <b>Disbursement For:</b>    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td> <b>State:</b>                  <b>District:</b> </td> <td></td> </tr> </table>	<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>State:</b> <b>District:</b>		
<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>State:</b> <b>District:</b>					
<b>B.</b> <b>Full Name (Last, First, Middle Initial)</b> <b>Enterprise Rent-A-Car</b>	<b>Transaction ID:</b> 1176755270216 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>01 / 11 / 2007</div> </div>				
<b>Mailing Address</b> 207 E. Kearney St.	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">581.85</div>				
<table style="width: 100%;"> <tr> <td style="width: 35%;"><b>City</b> Springfield</td> <td style="width: 15%;"><b>State</b> MO</td> <td style="width: 50%;"><b>Zip Code</b> 65804</td> </tr> </table>	<b>City</b> Springfield	<b>State</b> MO	<b>Zip Code</b> 65804	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
<b>City</b> Springfield	<b>State</b> MO	<b>Zip Code</b> 65804			
<table style="width: 100%;"> <tr> <td style="width: 55%;"> <b>Purpose of Disbursement</b>  Rental car expense </td> <td style="width: 45%; text-align: center;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>  Category/ Type </td> </tr> <tr> <td colspan="2"><b>Candidate Name</b></td> </tr> </table>	<b>Purpose of Disbursement</b> Rental car expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type	<b>Candidate Name</b>		
<b>Purpose of Disbursement</b> Rental car expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type				
<b>Candidate Name</b>					
<table style="width: 100%;"> <tr> <td style="width: 30%;"> <b>Office Sought:</b>    <input checked="" type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President </td> <td style="width: 70%;"> <b>Disbursement For:</b>    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td> <b>State:</b>                  <b>District:</b> </td> <td></td> </tr> </table>	<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>State:</b> <b>District:</b>		
<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>State:</b> <b>District:</b>					
<b>C.</b> <b>Full Name (Last, First, Middle Initial)</b> <b>Hertz Rent-A-Car</b>	<b>Transaction ID:</b> 1176738204387 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>01 / 11 / 2007</div> </div>				
<b>Mailing Address</b> Ronald Reagan National Airport	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">734.71</div>				
<table style="width: 100%;"> <tr> <td style="width: 35%;"><b>City</b> Alexandria</td> <td style="width: 15%;"><b>State</b> VA</td> <td style="width: 50%;"><b>Zip Code</b> 22314</td> </tr> </table>	<b>City</b> Alexandria	<b>State</b> VA	<b>Zip Code</b> 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	
<b>City</b> Alexandria	<b>State</b> VA	<b>Zip Code</b> 22314			
<table style="width: 100%;"> <tr> <td style="width: 55%;"> <b>Purpose of Disbursement</b>  Rental car expense </td> <td style="width: 45%; text-align: center;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>  Category/ Type </td> </tr> <tr> <td colspan="2"><b>Candidate Name</b></td> </tr> </table>	<b>Purpose of Disbursement</b> Rental car expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type	<b>Candidate Name</b>		
<b>Purpose of Disbursement</b> Rental car expense	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type				
<b>Candidate Name</b>					
<table style="width: 100%;"> <tr> <td style="width: 30%;"> <b>Office Sought:</b>    <input checked="" type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President </td> <td style="width: 70%;"> <b>Disbursement For:</b>    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td> <b>State:</b>                  <b>District:</b> </td> <td></td> </tr> </table>	<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>State:</b> <b>District:</b>		
<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Disbursement For:</b> 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>State:</b> <b>District:</b>					
<table style="width: 100%;"> <tr> <td style="width: 65%;"> <b>SUBTOTAL of Disbursements This Page (optional)</b> ..... </td> <td style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 5px; text-align: right;">0.00</div> </td> </tr> <tr> <td> <b>TOTAL This Period (last page this line number only)</b> ..... </td> <td></td> </tr> </table>		<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	<div style="border: 1px solid black; padding: 5px; text-align: right;">0.00</div>	<b>TOTAL This Period (last page this line number only)</b> .....	
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	<div style="border: 1px solid black; padding: 5px; text-align: right;">0.00</div>				
<b>TOTAL This Period (last page this line number only)</b> .....					

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Matsuhisa

Mailing Address 129 N. La Cienega Blvd.

City State Zip Code  
Beverly Hills CA 90211Purpose of Disbursement  
Food and beverage expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176754654333

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	7

Amount of Each Disbursement this Period

245.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

National Car Rental

Mailing Address 4170 Highway 2 East

City State Zip Code  
Kalispell MT 59901Purpose of Disbursement  
Rental car expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176755147377

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	7

Amount of Each Disbursement this Period

265.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Ruth's Chris Steak House

Mailing Address 2231 Crystal Drive

City State Zip Code  
Arlington VA 22314Purpose of Disbursement  
Food and beverage expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176738490189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	7

Amount of Each Disbursement this Period

239.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Snowmass Ski Area

Mailing Address PO Box 5010

City State Zip Code  
Snowmass Village CO 81615

Purpose of Disbursement  
lift tickets for fundraising event

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176754278707

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

948.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 350 S. Palm Canyon Drive

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176738271604

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

239.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 350 S. Palm Canyon Drive

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement  
Supplies expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176754034029

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

105.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) U.S. Airways Mailing Address PO Box 12346	<b>Transaction ID:</b> 1176754327596 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div>
City State Zip Code Pittsburgh PA 15231 Purpose of Disbursement Traveling expense Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>621.20</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. House of Representatives Mailing Address Capitol Hill City State Zip Code Washington DC 20500 Purpose of Disbursement Food and beverage charges Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1176754511964 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>26.30</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) United Airlines Mailing Address PO Box 66423 City State Zip Code Chicago IL 60666 Purpose of Disbursement Traveling expense Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1176753951360 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>713.20</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
United Airlines Air Travel Plan

Mailing Address PO Box 2013

City Chicago State IL Zip Code 60673

Purpose of Disbursement  
Traveling expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176738381474

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

566.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address PO Box 2167

City Folsom State CA Zip Code 95763

Purpose of Disbursement  
Telephone charges

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176754991836

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

32.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Yard House

Mailing Address 71800 Highway 111

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement  
Food and beverage expense

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176738530125

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

122.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement  
merchant fees

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 1176686619531

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

25.48

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 3530

City Rancho Cordova State CA Zip Code 95741-3530

Purpose of Disbursement  
returned check fee

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 1176691213260

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Bellwether Consulting Group

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Printing & shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 1173727278866

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

91.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

121.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 1775 I Street, NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Faxing, Printing &amp; shipping</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175091412656</p> <p>Date of Disbursement 03 / 28 / 2007</p> <p>Amount of Each Disbursement this Period -2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 1775 I Street, NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Faxing, Printing &amp; shipping</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175091469435</p> <p>Date of Disbursement 03 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>12/19/07 ck #5486 repayment</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 1775 I Street, NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Faxing, Printing &amp; shipping</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175695643361</p> <p>Date of Disbursement 02 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 1775 I Street, NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Fundraising Consulting Bonus</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175695719934  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 2 / 0 1 / 2 0 0 7</p> <p><b>Amount of Each Disbursement this Period</b>  7462.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bieber Communications</p> <p>Mailing Address 3605 W. MacArthur Boulevard Ste. 712</p> <p>City Santa Ana State CA Zip Code 92704</p> <p>Purpose of Disbursement Printing/mailling services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1171982833755  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 2 / 0 9 / 2 0 0 7</p> <p><b>Amount of Each Disbursement this Period</b>  575.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bieber Communications</p> <p>Mailing Address 3605 W. MacArthur Boulevard Ste. 712</p> <p>City Santa Ana State CA Zip Code 92704</p> <p>Purpose of Disbursement Printing/mailling services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1173707309535  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 2 / 2 0 / 2 0 0 7</p> <p><b>Amount of Each Disbursement this Period</b>  3300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**11337.00**

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee**A.**Full Name (Last, First, Middle Initial)  
Bieber CommunicationsMailing Address 3605 W. MacArthur Boulevard  
Ste. 712

City Santa Ana State CA Zip Code 92704

Purpose of Disbursement  
Printing/mailling services

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173708106119  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	0	7

Amount of Each Disbursement this Period

3306.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Blake Photography

Mailing Address 10660 Cayuga DR

City Dallas State TX Zip Code 75228

Purpose of Disbursement  
Event photos

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173708344919  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	0	7

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Mailing Address 300 First Street, SE

City Washington State DC Zip Code 20515

Purpose of Disbursement  
food, beverage

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175692167570  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	7

Amount of Each Disbursement this Period

1215.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

6521.46

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cardinal Promotions</p> <p>Mailing Address 68-895 Perez Road Suite 16</p> <p>City Cathedral City State CA Zip Code 92234</p> <p>Purpose of Disbursement Embroidery service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175089264440  <b>Date of Disbursement</b>            M M / D D / Y Y Y Y            0 3 / 2 7 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period            846.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address 17330 Preston Road Suite 100A</p> <p>City Dallas State TX Zip Code 75252</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1173707941705  <b>Date of Disbursement</b>            M M / D D / Y Y Y Y            0 2 / 2 2 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period            121.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address 17330 Preston Road Suite 100A</p> <p>City Dallas State TX Zip Code 75252</p> <p>Purpose of Disbursement Cell Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175089336249  <b>Date of Disbursement</b>            M M / D D / Y Y Y Y            0 3 / 2 6 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period            6.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**974.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address 17330 Preston Road Suite 100A</p> <p>City Dallas State TX Zip Code 75252</p> <p>Purpose of Disbursement Cell phone service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175695555007</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 204.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address 17330 Preston Road Suite 100A</p> <p>City Dallas State TX Zip Code 75252</p> <p>Purpose of Disbursement Cell phone service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175700372831</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 110.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address 17330 Preston Road Suite 100A</p> <p>City Dallas State TX Zip Code 75252</p> <p>Purpose of Disbursement Cell phone service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175701339863</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 196.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

512.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102</p> <p>Purpose of Disbursement Data import service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1168621269896</p> <p>Date of Disbursement 01 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102</p> <p>Purpose of Disbursement Data import service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1168621909121</p> <p>Date of Disbursement 01 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102</p> <p>Purpose of Disbursement Data import service</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1171654043994</p> <p>Date of Disbursement 02 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 314.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**814.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement

Data import service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173707230445

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement

Data import service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173713582776

Date of Disbursement

03 / 06 / 2007

Amount of Each Disbursement this Period

69.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 610 Gateway Ctr Way  
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement

Data import service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175090559647

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

569.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140	<b>Transaction ID:</b> 1173713959145 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>85.08</div> <div><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140	<b>Transaction ID:</b> 1175089807915 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>180.34</div> <div><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140	<b>Transaction ID:</b> 1175692472973 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 7</div> </div>
City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>93.61</div> <div><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>359.03</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140	<b>Transaction ID:</b> 1175699013556 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 0 7</div> </div>
City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1376.09</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175699059540 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>493.88</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) GE Capital Mailing Address PO Box 642111 City Pittsburgh State PA Zip Code 15264 Purpose of Disbursement Coping/faxing services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175692259538 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>382.34</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>2252.31</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
GE Capital

Mailing Address PO Box 642111

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement  
Coping/faxing services

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175701907872  
Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

191.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Sabrina Garcia

Mailing Address 81944 Villa Reale

City Indio State CA Zip Code 92203

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173364501997  
Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

2899.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Sabrina Garcia

Mailing Address 81944 Villa Reale

City Indio State CA Zip Code 92203

Purpose of Disbursement  
Mileage & reimbursement

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175092133218  
Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1374.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4465.35

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Got Junk Mailing Address 1460 West 9th Street	<b>Transaction ID:</b> 1175092822687 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 7</div> </div>
City Upland State CA Zip Code 91786 Purpose of Disbursement Junk hauling Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>268.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> See ck#5580 to Sabrina Garcia.
<b>B.</b> Full Name (Last, First, Middle Initial) Sabrina Garcia Mailing Address 81944 Villa Reale City Indio State CA Zip Code 92203 Purpose of Disbursement Salary Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175192563733 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2899.53</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Sabrina Garcia Mailing Address 81944 Villa Reale City Indio State CA Zip Code 92203 Purpose of Disbursement Salary Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175261054672 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2899.53</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**5799.06**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sabrina Garcia

Mailing Address 81944 Villa Reale

City State Zip Code  
Indio CA 92203

Purpose of Disbursement  
salary

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1176686318995

Date of Disbursement

01 / 01 / 2007

Amount of Each Disbursement this Period

2884.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Jivaldi LLC

Mailing Address 2735 Eagles Landing Court

City State Zip Code  
Dublin CA 94568

Purpose of Disbursement  
Web Hosting/Maintenance

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1168621819781

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

768.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Jivaldi LLC

Mailing Address 2735 Eagles Landing Court

City State Zip Code  
Dublin CA 94568

Purpose of Disbursement  
website hostage, usage, maintenance & up

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1171653137564

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

1112.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4765.77

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee**A.**Full Name (Last, First, Middle Initial)  
Jivaldi LLC

Mailing Address 2735 Eagles Landing Court

City State Zip Code  
Dublin CA 94568Purpose of Disbursement  
Web Hosting/Maintenance

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173727553617

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	7

Amount of Each Disbursement this Period

831.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Meredith KelleyMailing Address 1155 21st ST, NW  
Suite 300City State Zip Code  
Washington DC 20036Purpose of Disbursement  
Blackberry

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1174580680535

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	0	7

Amount of Each Disbursement this Period

687.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Cingular WirelessMailing Address 17330 Preston Road  
Suite 100ACity State Zip Code  
Dallas TX 75252Purpose of Disbursement  
blackberry

Candidate Name

001  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1176694381076

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	0	7

Amount of Each Disbursement this Period

687.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**see check to Meredith Kel-  
ley

SUBTOTAL of Disbursements This Page (optional) .....

1518.61

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Palm Springs Florist Mailing Address 894 N Palm Canyon DR	<b>Transaction ID:</b> 1173706503170 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 0 7</div> </div>
City State Zip Code Palm Springs CA 92262 Purpose of Disbursement Flowers for an event Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>91.59</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642 City State Zip Code Culver City CA 90231-3642 Purpose of Disbursement Payroll services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1168621713004 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>79.79</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 2950 City State Zip Code Merrifield VA 22116 Purpose of Disbursement Payroll services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1171576741157 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 9 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>234.05</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**405.43**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642	<b>Transaction ID:</b> 1173364613507 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement tax payment Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>896.22</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 2950 City Merrifield State VA Zip Code 22116 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1173727498183 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>78.05</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642 City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175192644886 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>868.22</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>1842.49</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642	<b>Transaction ID:</b> 1175261137215 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	0	7													
City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>896.22</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	896.22																				
896.22																						
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642 City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 1176686494973 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>883.23</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	7	883.23
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		0	1		2	0	0	7													
883.23																						
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 3642 City Culver City State CA Zip Code 90231-3642 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 1176687895357 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1458.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	7	1458.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	0	7													
1458.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

3237.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 95 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
Wilmington

State  
DE

Zip Code  
19801

Purpose of Disbursement

Postage by phone

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1168621011734

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

100.79

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
Wilmington

State  
DE

Zip Code  
19801

Purpose of Disbursement

Postage by phone

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175694826911

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

117.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
Wilmington

State  
DE

Zip Code  
19801

Purpose of Disbursement

Postage by phone

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175694979003

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

1739.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1957.57

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
WilmingtonState  
DEZip Code  
19801Purpose of Disbursement  
Postage

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175695417173

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	7

Amount of Each Disbursement this Period

106.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**B.**

Full Name (Last, First, Middle Initial)

Pitney Bowes Inc.

Mailing Address 1201 Market Street

City  
WilmingtonState  
DEZip Code  
19801Purpose of Disbursement  
postage machine maintenance

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175695486043

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	7

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**C.**

Full Name (Last, First, Middle Initial)

Plaza Del Sol

Mailing Address 1555 S. Palm Canyon Drive  
Suite G106City  
Palm SpringsState  
CAZip Code  
92264Purpose of Disbursement  
Monthly office rental

Candidate Name

  
Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173709430770

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	7

Amount of Each Disbursement this Period

665.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1246.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Plaza Del Sol</p> <p>Mailing Address 1555 S. Palm Canyon Drive Suite G106</p> <p>City Palm Springs State CA Zip Code 92264</p> <p>Purpose of Disbursement Monthly office rental</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175089595097</p> <p>Date of Disbursement 03 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 665.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Plaza Del Sol</p> <p>Mailing Address 1555 S. Palm Canyon Drive Suite G106</p> <p>City Palm Springs State CA Zip Code 92264</p> <p>Purpose of Disbursement Monthly office rental</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1175699354284</p> <p>Date of Disbursement 01 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 665.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Rancho Las Palmas</p> <p>Mailing Address 41-000 Bob Hope Drive</p> <p>City Rancho Mirage State CA Zip Code 92270</p> <p>Purpose of Disbursement Campaign event expenses</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1170278464884</p> <p>Date of Disbursement 01 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 422.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

1752.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
SCM Associates

Mailing Address 10 Main Street  
PO Box 720

City Jaffrey State NH Zip Code 03452

Purpose of Disbursement  
Printing/Shipping services

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173708006843  
Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

9441.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
SCM Associates

Mailing Address 10 Main Street  
PO Box 720

City Jaffrey State NH Zip Code 03452

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173726712676  
Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

19.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Time Warner Cable

Mailing Address 41725 Cook Street

City Palm Desert State CA Zip Code 92211-5100

Purpose of Disbursement  
Cable service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173707757512  
Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

151.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

9612.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Time Warner Cable

Mailing Address 810 N farrell Drive

City State Zip Code  
Palm Springs CA 92262-5998

Purpose of Disbursement

Cable service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 1175089889818

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

151.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Time Warner Cable

Mailing Address 41725 Cook Street

City State Zip Code  
Palm Desert CA 92211-5100

Purpose of Disbursement

Cable tv service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 1175700269099

Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

151.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Toby Willaby

Mailing Address 405 Onyx Drive

City State Zip Code  
Palm Springs CA 92264

Purpose of Disbursement

Graphic design service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 1173707518196

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

420.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

722.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Toby Willaby Mailing Address 405 Onyx Drive	<b>Transaction ID:</b> 1173708527472 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Graphic design service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>375.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Toby Willaby Mailing Address 405 Onyx Drive City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Graphic design service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1173727363033 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>75.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Toby Willaby Mailing Address 405 Onyx Drive City Palm Springs State CA Zip Code 92264 Purpose of Disbursement Graphic design service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1174659678876 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>125.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>575.00</div> <b>TOTAL</b> This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Toby Willaby

Mailing Address 405 Onyx Drive

City  
Palm Springs

State  
CA

Zip Code  
92264

Purpose of Disbursement  
Graphic design service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175693078606

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

225.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Top of the Line Signs

Mailing Address PO Box 179

City  
La Quinta

State  
CA

Zip Code  
92247

Purpose of Disbursement  
Signs

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173728630968

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Twenty-First Century Group

Mailing Address 434 NJ Ave, SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Food for event

Candidate Name

007  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175089542005

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

1265.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

2090.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Valley Office Equipment

Mailing Address 36-665 Bankside Drive  
#B

City Cathedral City State CA Zip Code 92234

Purpose of Disbursement  
Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173713777305

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

35.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Valley Office Equipment

Mailing Address 36-665 Bankside Drive  
#B

City Cathedral City State CA Zip Code 92234

Purpose of Disbursement  
Copy machine supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175090313455

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

150.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 9622

City Mission Hills State CA Zip Code 91346

Purpose of Disbursement  
Cell Phone bill

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173707437216

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

72.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

258.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622	<b>Transaction ID:</b> 1173726609337 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 0 7</div> </div>
City Mission Hills State CA Zip Code 91346 Purpose of Disbursement Cell Phone Service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>98.03</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hills State CA Zip Code 91346 Purpose of Disbursement Cell Phone Service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175089662188 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>76.92</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hills State CA Zip Code 91346 Purpose of Disbursement Cell Phone Service Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 1175090078153 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>60.75</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**235.70**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 107

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 2167

City  
Folsom

State  
CA

Zip Code  
95763

Purpose of Disbursement

Cell Phone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175700543578

Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

282.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 9622

City  
Mission Hills

State  
CA

Zip Code  
91346

Purpose of Disbursement

Phone service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1175700609139

Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

200.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address 1717 Arch Street  
25th Floor

City  
Philadelphia

State  
PA

Zip Code  
19103

Purpose of Disbursement

Phone service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 1173707690578

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

479.66

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

961.86

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 107

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address 1717 Arch Street  
25th Floor

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement

Phone service

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 1175089999048

Date of Disbursement

MM / DD / YY  
03 / 26 / 2007

Amount of Each Disbursement this Period

472.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

472.43

TOTAL This Period (last page this line number only) .....

102608.30

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 107

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

A.

Full Name (Last, First, Middle Initial)

Mary Hart

Mailing Address 9440 Santa Monica Blvd  
#407

City State Zip Code  
Beverly Hills CA 90210

Purpose of Disbursement  
refund

Candidate Name

010  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 1176693931593

Date of Disbursement

MM / DD / YYYY  
01 / 23 / 2007

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

2000.00

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 107

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)  
Mary Bono Mack Committee

**A.**

Full Name (Last, First, Middle Initial)  
Shelter From the Storm

Mailing Address 73555 Alessandro DR  
Suite D

City State Zip Code  
Palm Desert CA 92260

Purpose of Disbursement  
Charitable donation

Candidate Name

012  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1175192902780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Sister to Sister

Mailing Address 601 F Street, NW

City State Zip Code  
Washington DC 20004

Purpose of Disbursement  
charitable donation

Candidate Name

001  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 1172692464731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

21200.00

**TOTAL** This Period (last page this line number only) .....

21200.00